

## **Quotation Advert**

| Opening Date:                            | 29/01/2019                                | 100  |
|--|---|------|
| Closing Date:                            | 05/02/2019                                | []   |
| Closing Time:                            | 11:00                                     |      |
| INSTITUTION DETAILS                      |   |      |
| Institution Name:                        | Grey's hospital                           | V    |
| Province:                                | KwaZulu-Natal                             |      |
| Department or Entity:                    | Department of Health                      |      |
| Division or section:                     | Central Supply Chain Management           |      |
| Place where goods / services is required | Grey's Hospital                           |      |
| Date Submitted                           | 25/01/2019                                | 100  |
| ITEM CATEGORY AND DETAILS                |   | 7.6  |
| Quotation Number:                        | ZNQ:                                      |      |
| Itom Catagonii                           | 1467/06/18                                |      |
| Item Category: Item Description:         | Goods                                     | ~    |
|  | months = 30 catheters)                    |      |
| Quantity (if supplies)                   | 5 units per month over 6 months           |      |
| COMPULSORY BRIEFING SESSION              | / SITE VISIT                              |      |
| Select Type:                             | Not Applicable                            | ~    |
| Date :                                   |   | Tien |
| Time:                                    |   | V-4- |
| Venue:                                   |   |      |
| QUOTES CAN BE COLLECTED FROM:            | Grey's Hospital - Supply Chain Department |      |
| QUOTES SHOULD BE DELIVERED TO:           | Grey's Hospital                           |      |
| ENQUIRIES REGARDING THE ADVE             | RT MAY BE DIRECTED TO:                    |      |
| Name:                                    | Nomfundo Ngubane                          |      |
| Email:                                   | nomfundo.shelembe@kznhealth.gov.za        |      |
| Contact Number:                          | 033 897 3481                              |      |
| Finance Manager Name:                    | Mrø B.G. Anderson                         |      |
| Finance Manager Signature:               |   |      |

No late quotes will be considered